Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER No on Proposition 8: Stop the Dangerous Dialysis Proposition, sponsored by the California Dialysis Council		Date of This Filing10/08/2018		Date Stamp	CALIFORNIA 497	
AREA CODE/PHONE NUMBER (916)442-7757	I.D. NUMBER (if applicable) 1399974		Report No.	273602-14		For Official Use Only
STREET ADDRESS		Amendment to Report No		Page 1 of 3		
CITY Sacramento		IP CODE 5814	(explain below) No. of Pages	3		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
08/31/2018	DaVita Washington, DC 20001 ID# 1257183	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$19,311,186.00
08/31/2018	Fresenius Medical Care North America Newton, KS 67114 Memo Reference: NON:S497:370	□ IND □ COM ■ OTH □ PTY □ SCC		\$24,578.27
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		

*Contributor Codes

IND - Individual PTY - Political Party

COM - Recipient Committee (other than PTY or SCC) SCC - Small Contributor Committee

OTH - Other

Reason for Amendment:

To add in-kind contribution reported late by donor.

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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STREET ADDRESS		Amendment to Report No	Page 2 of 3		
CITY Sacramento	STATE ZIP CODE CA 95814	No. of Pages3			

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

To add in-kind contribution reported late by donor.

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: NON:S497:370 In-kind contribution for compensated staff services and CMP
In-kind contribution for compensated staff services and CMP